"If the difference in column 1 is less than zero, onter "0" in column 2 (Column 3) (Column 1) (Column 2) CLAIMS . HIGHEST PRESENT NUMBER REMAINING **EXTRA** PREVIOUSLY AFTER AMENDMENT PAID FOR MENDMENT 1/4 Minus **Total** Fee Alternisation Reserve for with Minus Independent FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (Column 3) (Column 2). (Column 1) HIGHEST CLAIMS PRESENT NUMBER REMAINING **EXTRA** PREVIOUSLY AFTER AMENDMENT PAID FOR AMENDMENT Minus Total = 444 Minus Independent FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (Column 8) (Column 2) (Column Y) HIGHEST CLAIMS PRESENT NUMBER REMAINING EXTRA **AFTER** PREVIOUSLY AMENDMENT PAID FOR AMENDMENT: Minus Total Minus Independent

FOR

BASIC FEE TOTAL CLAIMS

INDEPENDENT CLAIMS

	O CIPA							חם	Application of Docket Number				
PATENT APPLICATION FEE DETERMINATION RECORD Effective , 1998 FILE DATE													
******		CL		AIMS AS FILED - PART			T ((Column 2)			ENTITY	OR	OTHER SMALL E	
FOR			NUMBER FILED			NUMBER EXTRA			RATE	FEE		RATE	
BASIC FEE										380.00	OR	7/	
OTAL CLAIMS			25 minus 20 =			5		ľ	, x \$	-	OR	×18 =	
NDEPENDENT CLAIMS			2 minus 3			E .			X =		OR -	% 0:	
KULT	IPLE DEPEND	ENT CL	AIM PRESENT						+13 =		-	+2 0=	
If the difference in column 1 is less than zero, order "0" in column 2								L	TOTAL		J., L	TOTAL	
								4.63	Negan .	ll	OR	OTHER	
	•	_ (Çolu	(mrt 1)		(C	olumn 2)	(Column 3)		EMALL	ENTITY	OR	EMALL E	
ź I		REMA	UMS UNING TER DMENT		PRE	GHEST JMBER VIOUSLY JD FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	,	RATE	
	Total	.//		Minus'	** 6	90.	= 44	0	× 9 =		OR	x 18 = 7	
	Independent	• 4	,1	Minus	***	3	=		×31=		OR	× 18= 8	
₹	FIRST PRESENTATION OF MULTIPLE D				DEPE	NDENT CL	MIA		+/30=		OR	1200=	
(Column 1) (Column 2) (Column 3)									ADDIT. FEE			TOTAL O	
MENDIMEN		CL/ REM/ AF	AMS AIMS AINING TER DMENT		HI	GHEST UMBER EVIOUSLY ND FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	
	Total	•	• ,	Minus	**	*	=		x\$9=		OR	x/8=	
	Independent	*:		Minus	444	•	E	-	×39=		OR	x.78=	
AME	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+/30=		OR	1260=	
(Column 2) (Column 2) (Column 8)									TOTAL ADDIT. FE		OR	ADDIT. FEE	
AMENDMENT		CL REM	AIMS AINING TER IOMENT		PR	IIGHEST IUMBER EVIOUSLY AID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	
	Total	•		Minus	44		E		x\$9=		OR	1-10	
	Independent	•		Minus	***	· ·	E]	×39=		OR	×78=	
-	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+130		OR	2 2 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 8. ** If the entry in column 1 is less than the entry in column 2, write "0" in column 8. ** If the "1 tones! Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ** ADDIT. FEE OR ADDIT. FEE OR ADDIT. FEE												ADDIT FEE	

Hease Complete

FORM PTO-875 (Flav. 8/97)

*U.S. Government Pylving Office: 1997 - 431-571/99164

Peters and Tresement Office, U.S. DEPARTMENT O